

# Maurice Hinchey NEWS

## 22nd CONGRESSIONAL DISTRICT, NEW YORK

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### HINCHEY SPEAKS TO NURSES ON KEY ISSUES

BINGHAMTON - U.S. Representative Maurice Hinchey (NY-22) today was honored as the "Legislator of the Year" by the New York State Nurses' Association. The award was presented at Broome Community College Schools of Nursing at an event to kick off National Nurses' Week. Hinchey then made the following remarks:

Thank you. I'm very grateful for this honor and for the opportunity to help you kick off National Nurses' Week.

It's always an honor to receive an award, but I consider it a very special distinction to be honored by nurses, because I hold you and your profession in such high regard. After all, it's nurses who put the "care" in health care.

Throughout my legislative career, both in Albany and now in Washington, I have worked very hard to bring nurses' issues to the forefront of health care debates. You all are on the front lines of our nation's health care system, play a most critical role in patient care, and you deserve to have a seat at the table when public policy is being made.

Nurses are likely to be the first medical professional that a patient comes in contact with at a hospital or doctor's office and the last medical professional he or she sees before they leave. In between, it is the nurse who will monitor the patient's needs, vital signs and quality of care, and it's the nurse who will notice if something's going wrong. When a patient leaves the hospital, it's the care of a nurse that he or she will remember.

As highly esteemed as nurses are by patients, today's fractious health care system does not, in my opinion, give appropriate credit to the hardworking and extremely caring men and women in this profession.

In their roles as the frontlines of American health care, nurses face new challenges:

- **Workplaces are more dangerous.** Needle-stick injuries, blood-borne diseases, and bioterrorism threats all contribute to the increased risk of disease or injury for health care professionals.
- **Working conditions are deteriorating.** Nearly half of all nurses report being forced to work mandatory overtime.

- **Health care facilities are understaffed.** The effects of the nursing shortage are already being felt in our communities. Our nurses are being forced to care for more patients, for longer hours, with less professional help.
- Increasingly, health care facilities are seeking to **replace nursing professionals with unlicensed aides**. This adds to the pressure on nurses, by forcing them to supervise workers who lack the medical qualifications to appropriately care for patients.

The public needs to be aware that all of these challenges for nurses are challenges for patients, because all of these concerns lead to a reduction in the quality of care. And all of these problems are contributing factors to today's nursing shortage.

The nursing shortage is not a projected crisis. It's here, and it's happening in our communities.

- **Within two years, New York will have a shortage of 12,640 RNs to meet the health care needs of New Yorkers.** By 2010, the U.S. Bureau of Labor Statistics projects that the nursing shortage will grow to one million nurses in this country.
- **Nineteen percent of registered nurses (almost 38,000) in New York State choose not to practice their profession. Nationwide, more than 500,000 nurses are not practicing.** Dissatisfaction with working conditions is cited as the number one cause.
- The RN workforce is aging significantly. Tens of thousands of today's nurses will be eligible for retirement within the next ten years, just as the retirement of the Baby Boom generation increases the demand for health care services.
- In New York last year, **1000 qualified applicants for nursing schools were turned away because the schools did not have enough faculty to teach them.** Several of the state's most promising nursing schools (including Syracuse and Niagara University's) have shut down their programs.
- To give but one local anecdote: last week, an advance practice nurse from another part of the state who visited my office told me that she had been asked to interview for a job at a Broome County hospital that had been vacant for three years.

Nurses deserve to be compensated fairly and competitively for their training, professionalism, and experience. Nursing salaries must be living wages. But as I said earlier, most nurses don't cite salary as their reason for job dissatisfaction or for leaving the profession.

As a member of the newly formed House Nursing Caucus, we are fighting to improve the working conditions that truly make the difference in the recruitment and retention of nurses.

Our agenda includes:

- **Full funding for the Nurse Reinvestment Act**, which we passed last year and President Bush signed into law. The bill:
  - **strengthens loan repayment programs and scholarships for nursing students;**
  - **helps today's nurses move up the ladder to advanced practices and specialty care;**
  - **creates a long-term training grant to develop and incorporate geriatric care into nursing programs; and**
  - **establishes a fast-track student loan repayment program for nursing students who agree to teach at a nursing school.**

We succeeded in securing a \$20 million increase in funding for Nurse Reinvestment Act programs for the current fiscal year, but that only funds the programs at half their authorized levels. **President Bush's budget proposal for the next fiscal year would cut \$15 million from these programs.**

- The **Safe Nursing and Patient Care Act**, of which I am an original cosponsor, would **limit mandatory overtime for nurses**. Many studies have demonstrated the relationship between extended shifts, fatigue and the deterioration of job performance. That's why we limit the hours that truckers and airline pilots work --- shouldn't we be just as concerned about the job performance of the health care professionals who hold our loved ones' lives in their hands?
- I will soon be reintroducing my legislation, the **Patient Safety Act**, which **requires health care facilities to publicly disclose their staff-to-patient ratios and the rates of errors and nosocomial infections**. Every patient deserves a registered nurse, but too many health care providers are substituting nurse professionals with unlicensed aides. We need stronger laws across the country to ensure safe staffing ratios, but where that does not exist, we ought to have a federal law that gives consumers the ability to make apples-to-apples comparisons about the quality of treatment that will be available to them.

The nursing shortage is just one symptom of the much broader crisis that is on the horizon. Here in Broome County, we can't afford to ignore the problems. The population of upstate New York -- and in Broome County, even more dramatically -- is aging faster than the rest of the country. **One-fifth of Broome County's population is over 60**, a far higher rate than the rest of the state and the country. The older the population, the greater the demand for health care services and the fewer people of working age to provide those services.

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The number one contributing factor in the nursing shortage is our failure to adequately fund health care --- too little support for nursing students and nursing programs, budget pressures to reduce staff and cut corners.

It's easy to blame hospitals for the working conditions that have driven nurses from the profession, but that would be unfair. **Health care providers are getting squeezed from all sides** --- insurance companies are pressuring them to cut costs and the shortage of nurses and other health professionals has forced a rise in salaries. The threat of a biological attack or another national emergency on the scale of 9/11 has forced providers to make substantial investments in training, supplies, new technology and security.

At the same time, public health care funding has been depressed for nearly a decade. **Medicare accounts for 50 percent of Broome County hospitals' revenue**, and probably accounts for a higher percentage of revenue for many individual medical practices. But Medicare reimbursements are not keeping up with inflation. In fact, since the Balanced Budget Act of 1997 was passed, Medicare reimbursements have **purposely** been held at **less than the rate of inflation**.

A recent study conducted by the Hospital Association of New York State (HANYS) demonstrates just how dramatic the impact of Medicare's cost constraints has been here in Broome County: **while the cost of providing health care services for the past six years has increased by 22.4 percent**, Medicare reimbursements to Our Lady of Lourdes Hospital have increased by **only 7.2 percent** during the same period. Medicare reimbursements to **UHS Hospitals** have increased by **only 4.4 percent**.

This "Medicare reimbursement gap" has a more devastating impact in this community because of the high percentage of Medicare-dependent seniors and the volume of the hospitals' revenue comes from Medicare.

Medicaid is not in any better shape. **Governor Pataki proposed cutting \$1 billion** from the program in his budget plan, in addition to increases in fees and taxes on health care providers that some hospitals have told me will cost them hundreds of thousands of dollars a year. It now seems likely that the state legislature will scale back those cuts, but we know that the state budget will be extremely stressed for years to come.

What the health care system desperately needs is an infusion of funding for Medicare and Medicaid from Washington, but the Republican leadership in Congress is attempting to do just the opposite. In order to make room for the president's \$1.2 trillion tax cut plan, the **House put a budget proposal on the table that would have cut another \$215 billion in Medicare funding and \$95 billion from Medicaid**. Although it didn't receive nearly as much attention, these proposals were more draconian than the plans advanced by Newt Gingrich in 1995 when he said his goal was to let Medicare "wither on the vine."

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Since that plan became public last month, Republicans have backed down on both the Medicaid and Medicare cuts. However, they have not named any additional programs they would cut to come up with the money to fund Bush's irresponsible tax cuts. We must remain alert because I believe both programs will be in jeopardy again before this budget cycle is complete. **If even a fraction of those cuts were enacted, dozens of hospitals across the state would be forced to close.**

**Medicare needs a complete restructuring of its provider reimbursement system**, so that funding is kept in line with the rising cost of providing health care. Hospitals, physicians and nurses want to provide the best quality care to our family members, but we have to give them the tools to do so. There had been broad bipartisan agreement earlier this year that we must urgently consider a Medicare reform package, but that changed dramatically as Bush pushed forward with his tax cut plans. **We must shift the debate back to strengthening Medicare and investing in urgent health care needs before we consider unaffordable tax cuts.**

On Medicaid, my top priority is to secure a fair rate of reimbursement from the federal government. **New York is reimbursed for only 50 percent of its Medicaid costs -- the lowest possible rate under federal guidelines. Other states can receive as much as 83 percent reimbursement.**

New York is one of only two states that split their share of the Medicaid bill with counties. That means that Medicaid policies in Washington have a very direct impact on the property taxes that we all pay in New York. As you know, property taxes are soaring here in Broome County and around the state (increasing almost 50 percent in some counties) because of the demand for Medicaid services that results from an economic downturn.

New York is not the only state that is struggling to meet its Medicaid demand. State revenues are down dramatically and the number of uninsured has spiked. In fact, most states are facing a fiscal crisis this year, but New York's situation has been worsened by our recovery from 9/11.

When I first came to Congress in 1993, I introduced legislation to increase New York's Medicaid matching rate. New life has been breathed into this effort with the introduction of the State Budget Relief Act. The bill would temporarily increase the Medicaid reimbursement rate for states that have high unemployment rates. If passed, it would deliver at least \$600 million a year to New York State for Medicaid expenses, which translates into savings of \$1.7 million a year for Broome County taxpayers.

That's a pretty substantial savings and we know that it's urgently needed. There is strong bipartisan support for the bill, but the President strongly opposes it.

Once again, this demonstrates the short sightedness of federal health care policy. It's hard to get folks to concentrate on our long-term health care needs, when we haven't even adequately addressed the crises of today.

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Nurses, you are the backbone that is keeping our fragile health care system together. Your advocacy for quality health care and the needs of patients is so important as my colleagues and I try to move forward with health care policies that address the real needs of Americans.